

NOTICE OF CONTRACT RENEWAL

State Of Missouri
Office Of Administration
Division Of Purchasing
PO Box 809
Jefferson City, MO 65102-0809
<http://oa.mo.gov/purchasing>

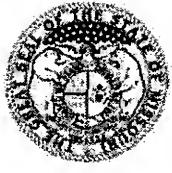
MISC
RFPS 30D349 01700042

CONTRACT NUMBER	CONTRACT TITLE
CS170042004	Alternatives to Abortion Program Services
AMENDMENT NUMBER	CONTRACT PERIOD
Amendment #001	July 1, 2017 through June 30, 2018
REQUISITION/REQUEST NUMBER	SAM II VENDOR NUMBER/MissouriBUYS SYSTEM ID
NR 886 DFA18000005	43161118100/MB00097920
CONTRACTOR NAME AND ADDRESS	STATE AGENCY'S NAME AND ADDRESS
THE HAVEN OF GRACE 1225 WARREN ST LOUIS MO 63106	Department of Social Services Division of Finance & Administration Svcs 221 W High Street, Room 310, PO Box 1082 Jefferson City MO 65102-1082

ACCEPTED BY THE STATE OF MISSOURI AS FOLLOWS:

Contract CS170042004 is hereby amended pursuant to the attached amendment #001, dated 08/14/17.

BUYER	BUYER CONTACT INFORMATION
Julie Kleffner	Email: julie.kleffner@oa.mo.gov Phone: (573) 751-7656 Fax: (573) 526-9816
SIGNATURE OF BUYER	DATE
	8-25-17
DIRECTOR OF PURCHASING	
	Karen S. Boeger



STATE OF MISSOURI
OFFICE OF ADMINISTRATION
DIVISION OF PURCHASING
CONTRACT RENEWAL

AMENDMENT NO.: 001
CONTRACT NO.: CS170042004
TITLE: Alternatives to Abortion Program Services
ISSUE DATE: 07/31/17

REQ NO.: NR 886 DFA1800005
BUYER: Julie Kleffner
PHONE NO.: (573) 751-7656
E-MAIL: Julie.Kleffner@oa.mo.gov

TO: THE HAVEN OF GRACE
1225 WARREN
ST LOUIS MO 63106

RETURN AMENDMENT BY NO LATER THAN: 08/14/17 AT 5:00 PM CENTRAL TIME

RETURN AMENDMENT TO THE DIVISION OF PURCHASING (PURCHASING) BY E-MAIL, FAX, OR MAIL/COURIER:

SCAN AND E-MAIL TO:	Julie.Kleffner@oa.mo.gov
FAX TO:	(573) 526-9816
MAIL TO:	PURCHASING, P.O. Box 809, Jefferson City, Mo 65102-0809
COURIER/DELIVER TO:	PURCHASING, 301 West High Street, Room 630, Jefferson City, Mo 65101-1517

DELIVER SUPPLIES/SERVICES FOB (Free On Board) DESTINATION TO THE FOLLOWING ADDRESS:

Missouri Department of Social Services
Division of Finance and Administrative Services
221 W. High Street, Room 310
Post Office Box 1082
Jefferson City MO 65102-1082

SIGNATURE REQUIRED

VENDOR NAME The Haven of Grace	MISSOURIBUY SYSTEM ID (SEE VENDOR PROFILE - MAIN INFORMATION SCREEN) MB00097920
MAILING ADDRESS 1225 Warren Street	
CITY, STATE, ZIP CODE St. Louis, MO 63106	

CONTACT PERSON Heather Winsby	hwinsby@havenofgracestl.org				
PHONE NUMBER 314-621-6507	FAX NUMBER 314-241-4913				
VENDOR TAX FILING TYPE WITH IRS (CHECK ONE)					
<input type="checkbox"/> Corporation	<input type="checkbox"/> Individual	<input type="checkbox"/> State/Local Government	<input type="checkbox"/> Partnership	<input type="checkbox"/> Sole Proprietor	<input checked="" type="checkbox"/> IRS Tax-Exempt
AUTHORIZED SIGNATURE 	DATE August 14, 2017				
PRINTED NAME Jo Curran	TITLE Interim Executive Director				

AMENDMENT #001 TO CONTRACT CS1700420004

CONTRACT TITLE: Alternatives to Abortion Program Services

CONTRACT PERIOD: July 1, 2017 through June 30, 2018

The State of Missouri hereby exercises its option to renew the above-referenced contract and desires to amend the contract.

Effective July 1, 2017, the administrative responsibilities of the Alternatives to Abortion was transferred from the Office of Administration, Commissioner's Office to the Missouri Department of Social Services at the following address:

Missouri Department of Social Services
Division of Finance and Administrative Services
221 W. High Street, Room 310
Post Office Box 1082
Jefferson City MO 65102-1082

Therefore, the all references to the state agency shall be hereby deemed to mean the Missouri Department of Social Services.

Consequently, Attachment 3 has been revised to refer to the Department of Social Services in lieu of the Office of Administration. All references to Attachment 3 shall be hereby deemed to mean the attached Attachment 3 referencing the Department of Social Services.

The General Assembly has made available additional funds for Alternatives to Abortion Program services. Therefore, pursuant to paragraph 2.12.3 b. of the RFP portion of the contract, the above-referenced contract shall be renewed for up to the maximum annual total price specified below. The contractor shall indicated in the table below the maximum annual total price for the provision of the Alternatives to Abortion Program services. In no event shall the contractor quote a price to exceed the maximum price identified in italics below. The Non-Residential Services, price per client, per month and the Residential Care Services, price per client, per month shall remain the same.

Geographic Region 6	\$ <u>460,312.60</u> <small>(<u>\$463,841.07</u>)</small>	maximum annual total price
---------------------	--	----------------------------

The contractor must provide a budget/price analysis of the maximum annual total price and a budget narrative.

Attachment 5, attached hereto, has been revised to reflect the new contract period.

The contractor shall sign and return this document, along with completed pricing, budget/price analysis, and budget narrative, on or before the date indicated.

NOTE: The contractor's failure to complete and return this document shall not stop the action specified herein. If the contractor fails to complete and return this document prior to the return date specified or the effective date of the contract period stated above, whichever is later, the state may renew the contract at the same price(s) as the previous contract period or at the price(s) allowed by the contract, whichever is lower.



Alternatives to Abortion
Contract NO. CS170042004

Budget

Salaries & Wages

Benefits

Direct Admin

Office Utilities

Facility Insurance

Office Supplies

Office Equip/Computers

Office Comm/Internet

Office Rep/Maint

Security

Staff Development

Accounting (Grant Assistance)

IT & Technology

Consulting (6 Mos.) (Interim ED)

Budget Narrative

232,368.00 Director of Programs, Program Manager,

29,378.00 Family Advocate, Therapist, 4 House

261,746.00 Parents

24,000.00 Electric, water, sewer, trash

26,880.00 Commerical Property, General Liability

2,000.00 As Stated

5,440.00 Computers and furniture

4,800.00 phone and wifi

32,000.00 eterminating, lawn, irrigation, snow removal

1,600.00 alarm system, cameras, monitoring

4,000.00 training

3,000.00 Accounting Services

8,000.00 IT Services

6,000.00 As Stated

117,720.00

Direct Program

Basic Needs/Baby

Cable

Grad/Milestone

Monthly Outings

Mental Health

Classroom Supplies

Computer Lab

Transportation

Furniture

Food

Household Supplies

3,500.00 Diapers, wipes, carseats, cribs, hygiene products, clothes

2,000.00 Cable services and equipment

3,200.00 Gifts/incentives for program completion

2,200.00 Educational and fun outings for shelter clients

2,000.00 assesments and ciriculum for life skills

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2,000.00 Client computer equipment

4,500.00 Bus Tickets, taxi, car rentals

1,000.00 Furniture for program needs

16,000.00 Groceries for shelter residents

5,500.00 Cleaning supplies, paper products

42,900.00

Total Salaries/Benefits

261,746.00

Total Direct Adm

117,720.00

379,466.00

10% Indirect

37,946.60

Total Program

42,900.00

Total Request

460,312.60

Attachment 3

Department of Social Services

Reimbursement Request for Other Services

Program: **Alternatives to Abortion**

Contractor: _____

Subcontractor: _____

Please enter below the information for each item/service to be purchased. List the date of purchase, item to be purchased, cost for the item, and the justification. Items must be approved **before** purchased/provided to be reimbursed.

Client Name _____

Date Enrolled _____

Proposed Purchase Date	Item	Total Cost (include formal estimate from provider of services)	Justification, include other sources of funding that have been attempted
Amt. to be reimbursed			

Under section 2.7.4 of the A2A contract, the following items and services are not eligible for reimbursement: taxes, travel expenses, shipping charges, insurance, interest, penalties, termination payments, attorney fees, and liquidated damages. Please subtract these charges from your total reimbursement request prior to submission.

Please return to Alternatives to Abortion Program Manager, State of Missouri – Department of Social Services, Division of Finance & Administrative Services, Broadway State Office Building, 221 W. High St., Room 310, P.O. Box 1082, Jefferson City, MO 65102-1082. May be faxed to 573/751-7598 or emailed to joy.e.benne@dss.mo.gov by the Contractor only.

Authorized person requesting purchase: _____ Date _____

Purchase is Approved Denied A2A Signature _____ Date _____

Reason for denying purchase: _____

Missouri Office of Administration

A2A Quarterly Expenditure Report

Agency: [Insert Agency Name]	Contract Number:
------------------------------	------------------

Program Year July 1, 2017 - June 30, 2018

Revenue	Federal (TANF)
Revenue Request	\$ -

Indirect Administrative Costs Calculations

Option 1: Federally Negotiated Indirect Cost Rate (FNICR)

Application Base:	\$ -
Federally Negotiated Indirect Cost Rate (FNICR): %	0.00%
Total Indirect Administrative Costs	\$ -

OR

Option 2: 10% De Minimus (use if no FNICR)

Application Base: Modified Total Direct Administrative Cost	\$ -
	10%
Total Indirect Administrative Costs	\$ -

Direct Administrative Costs	Federal (TANF)
Program Salaries and Wages	\$ -
Employee Benefits	\$ -
Employee Travel	\$ -
Employee Training	\$ -
Office Rent/Space	\$ -
Office Utilities	\$ -
Facility Insurance	\$ -
Office Supplies (under \$5,000)	\$ -
Equipment (Capitol Equipment over \$5,000 threshold)	\$ -
Office Communications	\$ -
Office Repairs and Maintenance	\$ -
Contract/Consulting	\$ -
Other (list):	\$ -
(add other categories as needed)	\$ -
Total Direct Administrative Cost	\$ -

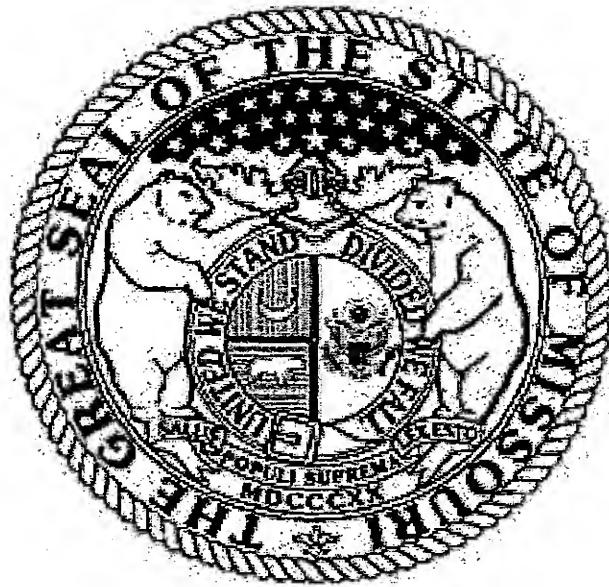
Less:	
Equipment (Capital Equipment over the \$5,000 threshold)	0
Contracting/Consulting (amount of each contract service over \$25,000)	0
Other based on definition	0

Modified Total Direct Administrative Cost	\$ -
--	------

Participant Services	Federal (TANF)
Transportation	\$ -
Job Training	\$ -
Tuition Assistance	\$ -
Contracted Residential Care	\$ -
Utility Assistance	\$ -
Emergency Shelter	\$ -
Housing Assistance	\$ -
(add others as needed)	\$ -
Total Participant Costs	\$ -

I hereby certify that the budget is taken from the original Books of Account and that budget amounts are valid and consistent with the terms of the contract.

Signature of Authorized Representative of [Insert Agency Name]	Date
--	------



State of Missouri
OFFICE OF ADMINISTRATION
Division of Purchasing
Contract Amendment Documentation

The following documentation consists of additional contract amendment documentation. The additional contract amendment documentation is not a part of the official contract amendment, but provides supporting information for the official contract amendment.

Kleffner, Julie

From: Morrison, Mary Ann
Sent: Wednesday, August 16, 2017 3:44 PM
To: Kleffner, Julie
Subject: FW: Alternatives to Abortion Program Services Agreement: Haven of Grace
Attachments: CS170042004-002 (Haven of Grace - FY18) APPROVED 8-16-17.pdf

Please see attached.

Thank you.

Mary Ann Morrison, Procurement Officer II
DSS/DFAS
Phone: (573) 526-3433
Fax: (573) 526-4678
Email: maryann.morrison@dss.mo.gov

From: Benne, Joy
Sent: Wednesday, August 16, 2017 3:43 PM
To: Morrison, Mary Ann
Subject: RE: Alternatives to Abortion Program Services Agreement: Haven of Grace

Mary Ann,
Please find attached the "APPROVED" budget for The Haven of Grace.

No changes were made to the original document received.

Thanks.

Joy E Benne, Fiscal Administrative Mgr.
Missouri Department of Social Services
Division of Finance & Administrative Services
Phone: (573) 751-7027
Fax: 573-751-7598
Email: joy.e.benne@dss.mo.gov

From: Morrison, Mary Ann
Sent: Tuesday, August 15, 2017 9:44 AM
To: Benne, Joy
Subject: FW: Alternatives to Abortion Program Services Agreement: Haven of Grace

Please review and advise if acceptable.

Thanks.

Mary Ann Morrison, Procurement Officer II
DSS/DFAS

Phone: (573) 526-3433
Fax: (573) 526-4678
Email: maryann.morrison@dss.mo.gov

From: Kleffner, Julie
Sent: Tuesday, August 15, 2017 9:16 AM
To: Morrison, Mary Ann
Subject: FW: Alternatives to Abortion Program Services Agreement: Haven of Grace

Please review and advise if acceptable to proceed.

Thanks

From: Nicole Feltes [mailto:NFeltes@havenofgracestl.org]
Sent: Monday, August 14, 2017 5:00 PM
To: Kleffner, Julie <Julie.Kleffner@oa.mo.gov>
Cc: Benne, Joy <Joy.E.Benne@dss.mo.gov>; Jo Curran <jcurran@havenofgracestl.org>; Heather Winsby <Hwinsby@havenofgracestl.org>
Subject: Alternatives to Abortion Program Services Agreement: Haven of Grace

Hello Ms. Kleffner,
Please see attached documents and let me know if you have any questions.

Kindest Regards,

Nicole Feltes

Director of Programs

Office: 314-621-6507
Cell: 314-323-8375

The Haven of Grace
1225 Warren St.
St. Louis, MO 63106

mission

Serving women who are young, pregnant, and homeless, we provide a safe, nurturing home, educational programs and long-term support for mother and child. Founded in faith, we instill hope, dignity and the pride of independence, one family at a time.

MEMORANDUM

Office of Administration
Division of Purchasing

TO: Laura Ortmeyer

FROM: Julie Kleffner

DATE: July 19, 2017

RE: Renewal/Amendment to the Alternatives to Abortion Program Services Contracts

The Department of Social Services has requested the Alternatives to Abortion Program Services contracts, CS170042001 through CS170042009, be renewed with a funding increase pursuant to House Bill 11, section 11.120, lines 2 through 6. Pursuant to paragraph 2.12.3 b. of the RFP portion of the contract, funds may increase at the time of renewal if funds are appropriated by the General Assembly.

The contracts are also being amended as follows:

1. The administrative responsibilities of the Alternatives to Abortion Program transferred from the Office of Administration to the Department of Social Services.
2. As a result of the transfer of administrative responsibilities, Attachment 3 is being revised to reflect the correct state agency.
3. Attachment 5 is being revised to reflect the appropriate contract period.

Due to the legislature including a rate increase in the Fiscal Year Budget via House Bill 11 (see attached) and is allowed by paragraph 2.12.3 b. of the contract, I am processing the renewal to the contracts allowing a price increase.

Additionally, 1 CSR 40-1.050 (8) states, "*Contracts awarded as the result of a competitive solicitation may be amended when such an amendment is in the best interest of the state and does not significantly alter the original intent or scope of the contract.*"

Therefore, since the intent and scope of the contract are not altered, I am proceeding to amend the contract as requested.

Kleffner, Julie

From: Benne, Joy
Sent: Wednesday, July 19, 2017 3:42 PM
To: Morrison, Mary Ann; Kleffner, Julie
Subject: RE: NR 886 DFA18000005-Alternatives to Abortion-FY18 Renewal
Attachments: RE: A2A FY18 Funding

Please see the attached email from Laclede County Pregnancy Center stating they do not want the increased funding for FY18. Thanks

Joy E Benne, Fiscal Administrative Mgr.

Missouri Department of Social Services
Division of Finance & Administrative Services
Phone: (573) 751-7027
Fax: 573-751-7598
Email: joy.e.benne@dss.mo.gov

From: Morrison, Mary Ann
Sent: Wednesday, July 19, 2017 3:39 PM
To: Kleffner, Julie
Cc: Benne, Joy
Subject: RE: NR 886 DFA18000005-Alternatives to Abortion-FY18 Renewal

In addition to response (2), Laclede County Pregnancy Support Center communicated with DSS they did not want the increased funding for FY18. Let me know if you need the documentation and I'll get it from the Program. Thanks.

Mary Ann Morrison, Procurement Officer II
DSS/DFAS
Phone: (573) 526-3433
Fax: (573) 526-4678
Email: maryann.morrison@dss.mo.gov

From: Morrison, Mary Ann
Sent: Wednesday, July 19, 2017 3:29 PM
To: Kleffner, Julie
Cc: Benne, Joy
Subject: RE: NR 886 DFA18000005-Alternatives to Abortion-FY18 Renewal

Thank you!

In response to (1), funding increase was based on HB 11, section 11.120 lines 2 through 6 minus 3% Governor's reserve on the general revenue portions (line 4) and per DSS upper management, line 6 funding amount was not included (if you need a copy of the HB, just let me know).

In response to (2), funding allocation approximate percentage was taken from section 3.3.2 of the RFP. This percentage was multiplied against the total funding allocation available for FY18 (HB11, section 11.120, lines 4 through 6) which gave the amount of funding for each of the 9 regions. Each region amount was based on # of awards made for each region as outlined in subsection of 3.3.2. Determination on who received the highest percentage is based on ranking from the evaluation process.

Please let me know if there is any additional information needed.

Mary Ann Morrison, Procurement Officer II
DSS/DFAS
Phone: (573) 526-3433
Fax: (573) 526-4678
Email: maryann.morrison@dss.mo.gov

From: Kleffner, Julie
Sent: Wednesday, July 19, 2017 1:05 PM
To: Morrison, Mary Ann
Subject: RE: NR 886 DFA18000005-Alternatives to Abortion-FY18 Renewal

I will get something drafted for your review.

Please provide (1) an explanation (e-mail/memo) explaining why funds have increased and (2) an explanation how funding for each contractor was determined for inclusion in the contract file.

Thank you

From: Morrison, Mary Ann
Sent: Wednesday, July 19, 2017 12:50 PM
To: PURCHMAIL <purchmail@oa.mo.gov>; Ortmeyer, Laura <Laura.Ortmeyer@oa.mo.gov>; Kleffner, Julie <Julie.Kleffner@oa.mo.gov>
Subject: NR 886 DFA18000005-Alternatives to Abortion-FY18 Renewal

In reference to NR 886 DFA18000005, please renew Alternatives to Abortion contracts/ CS170042001-009. The attached backup documentation includes the amendment verbiage, updated attachments and FY18 budget amounts for each contract (column I).

Prior to sending out for signature, please provide a copy of the amendment for program review.

Please contact me with any questions.

Thank you.

Mary Ann Morrison, Procurement Officer II
Missouri Department of Social Services
Division of Finance & Administrative Services
615 Howerton Court
P.O. Box 1643
Jefferson City, MO 65102-1643

Phone: (573) 526-3433

Fax: (573) 526-4678

Email: maryann.morrison@dss.mo.gov

Confidentiality Notice: This electronic communication is from the Missouri Department of Social Services (DSS), Division of Finance & Administrative Services, and is only intended for its addressee. This communication may contain information that is privileged, confidential or otherwise protected from disclosure by law and/or DSS policy. If you are not the intended recipient, or the employee or agency responsible for delivering this information to its recipient, do not copy, circulate, forward or otherwise disclose this document. If you have received this message in error, please notify the sender immediately by return email at maryann.morrison@dss.mo.gov or by phone at 573-526-3433.

Kleffner, Julie

From: Abigail Chisom <abigail@psclebanon.org>
Sent: Tuesday, July 18, 2017 12:23 PM
To: Benne, Joy
Subject: RE: A2A FY18 Funding

Hi Joy,

Since things have changed with the maternity home funding method we haven't used as much funding. I think we better stay with our original amount at this time so the money can be put to good use elsewhere.
Thank you,

Abigail Chisom
Assistant Director
Laclede County Pregnancy Support Center
417-532-8555

From: Benne, Joy [mailto:Joy.E.Benne@dss.mo.gov]
Sent: Tuesday, July 18, 2017 11:57 AM
To: 'Abigail Chisom'
Subject: A2A FY18 Funding

Abigail,

Question for Laclede County Pregnancy Support Center....For FY2018 the A2A program was given additional funding. Would Laclede County Pregnancy Support Center be able to spend the extra funding in FY2018 if awarded?

We are possibly looking at more than what was stated for maximum annual total price on the contract award page from OA. DSS wants to make sure everyone can use the extra funding without lapsing any.

Joy E Benne, Fiscal Administrative Mgr.

Missouri Department of Social Services
Division of Finance & Administrative Services
Broadway State Office Building
221 W. High St., Room 310
P.O. Box 1082
Jefferson City, MO 65102-1082
Phone: (573) 751-7027
Fax: 573-751-7598
Email: joy.e.benne@dss.mo.gov

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STATE OF MISSOURI
OFFICE OF ADMINISTRATION
DIVISION OF PURCHASING
CONTRACT RENEWAL

AMENDMENT NO.: 001
CONTRACT NO.: CS170042004
TITLE: Alternatives to Abortion Program Services
ISSUE DATE: 07/31/17

REQ NO.: NR 886 DFA18000005
BUYER: Julie Kleffner
PHONE NO.: (573) 751-7656
E-MAIL: Julie.Kleffner@oa.mo.gov

TO: THE HAVEN OF GRACE
1225 WARREN
ST LOUIS MO 63106

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FAX TO:	(573) 526-9816
MAIL TO:	PURCHASING, P.O. Box 809, Jefferson City, Mo 65102-0809
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Missouri Department of Social Services
Division of Finance and Administrative Services
221 W. High Street, Room 310
Post Office Box 1082
Jefferson City MO 65102-1082

SIGNATURE REQUIRED

VENDOR NAME	MissouriBUYS SYSTEM ID (SEE VENDOR PROFILE - MAIN INFORMATION SCREEN)
The Haven of Grace	MB00097920
MAILING ADDRESS	
1225 Warren Street	
CITY, STATE, ZIP CODE	
St. Louis, MO 63106	

CONTACT PERSON	hwinsby@havenofgracestl.org				
Heather Winsby					
PHONE NUMBER	FAX NUMBER				
314-621-6507	314-241-4913				
VENDOR TAX FILING TYPE WITH IRS (CHECK ONE)					
<input type="checkbox"/> Corporation	<input type="checkbox"/> Individual	<input type="checkbox"/> State/Local Government	<input type="checkbox"/> Partnership	<input type="checkbox"/> Sole Proprietor	<input checked="" type="checkbox"/> IRS Tax-Exempt
AUTHORIZED SIGNATURE		DATE			
		August 14, 2017			
PRINTED NAME		TITLE			
Jo Curran		Interim Executive Director			

AMENDMENT #001 TO CONTRACT CS1700420004

CONTRACT TITLE: Alternatives to Abortion Program Services

CONTRACT PERIOD: July 1, 2017 through June 30, 2018

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Geographic Region 6	\$ 460,312.60 <i>(\$463,841.07)</i>	maximum annual total price
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Alternatives to Abortion
Contract NO. CS170042004

Budget

Salaries & Wages

Benefits

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Facility Insurance

Office Supplies

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Office Rep/Maint

Security

Staff Development

Accounting (Grant Assistance)

IT & Technology

Consulting (6 Mos.) (Interim ED)

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232,368.00 Director of Programs, Program Manager,

29,378.00 Family Advocate, Therapist, 4 House

261,746.00 Parents

24,000.00 Electric, water, sewer, trash

26,880.00 Commerical Property, General Liability

2,000.00 As Stated

5,440.00 Computers and furniture

4,800.00 phone and wifi

32,000.00 exterminating, lawn, irrigation, snow removal

1,600.00 alarm system, cameras, monitoring

4,000.00 training

3,000.00 Accounting Services

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6,000.00 As Stated

117,720.00

Direct Program

Basic Needs/Baby

Cable

Grad/Milestone

Monthly Outings

Mental Health

Classroom Supplies

Computer Lab

Transportation

Furniture

Food

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2,000.00 Cable services and equipment

3,200.00 Gifts/incentives for program completion

2,200.00 Educational and fun outings for shelter clients

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2,000.00 Client computer equipment

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Total Salaries/Benefits

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Total Direct Adm

117,720.00

379,466.00

10% Indirect

37,946.60

Total Program

42,900.00

Total Request

460,312.60

PURCHASING

CONTRACT AMENDMENT ROUTING GUIDE

JK CS170042004 A# 001 8/14

UR 886 DFA 18000005

Revised 08/17/15

1. Indicate Contract Amendment Type

RENEWAL:	PERIOD OF	3	TOTAL	Performance Security Deposit: \$ _____
Renewal - % Increase	Cost Savings			
Renewal - \$ Increase	Cost Savings			
Renewal - W/O Increase				
SFS Renewal - Prices In Original Contract				Surety Bond: \$ _____
SFS Renewal - Prices Not in Original Contract				
EXTENSION PERIOD:				Annual Wage Order Number: _____
Extension - 30-Day				Annual Wage Order Date: _____
Termination				County(ies): _____
Extension - \$ Increase	Cost Savings			
Extension - W/O Increase				
Assignment				Other Instructions: _____
Cancellation/Termination				
<input checked="" type="checkbox"/> Other Amendment				

2. Preliminary Tasks/Verifications

A. Section 34.040.6, RSMo	Buyer/Section Support	DT	7-31-17
B. Purchasing Suspension List	Buyer/Section Support	DT	7-31-17
C. Federal Suspension - SAM.GOV	Buyer/Section Support	DT	7-31-17
D. Labor Stds - OA/FMDC Contractor Debarment Lists	Buyer/Section Support	DT	7-31-17
E. Review of Participation Commitment Attainment - If app, Verify Receipt of 1 st Renewal - Blind/Shel Wkshp Affdvt	Buyer		
F. SFS Review/Justification - Insert Advertising Date, if applicable	Buyer		

3. Prepare Contract Amendment

4. Review/Approve Contract Amendment (If Signature Required)	Buyer	DT	7-31-17
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Initial

Supervisor

Date

Section Manager

LO

Asst Director

Director

5. E-Mail/Fax Contract Amendment (If Signature Required)	Buyer/Section Support	DT	8-1-17
Contractor E-Mail Address/Fax Number	aventashavenofgraves@1.org		
State Agency Contact E-Mail Address	Mary Ann Morrison		
Section 34.040.6, RSMo, Letter	Follow-Up Notes:		

6. Review Contract Amendment Response - Verifications

A. Renewal/Extension Pricing	Buyer/Section Support		
B. Section 34.040.6, RSMo	Buyer/Section Support		
C. Performance Security Deposit/Surety Bond	Buyer/Section Support		
D. Renewal/Extension with Cost Savings Language	Buyer		
E. Statewide Notice	Buyer		
F. SFS Authorized Limit \$	Buyer		
G. Contract Assignment Only Verifications - Complete unless completed in Step 2 above.			
1. E-Verify Exhibit/Affidavit/Documentation	Buyer/Section Support		
2. Assignment and Consent Form	Buyer/Section Support		
3. Purchasing Suspension List	Buyer/Section Support		
4. Federal Suspension - SAM.GOV	Buyer/Section Support		
5. Labor Stds - OA/FMDC Contractor Debarment Lists	Buyer/Section Support		

7. Prepare Contract Amendment Award Document/Statewide Notice

8. Review/Approve Contract Amendment Award Document	Buyer	DT	8-22-17
Initial	Supervisor	Section Manager	Director

9. Process Contract Amendment

AM 300 PMM 0007687.m1	Buyer/Section Support	DT	8/25/17
Distribute E-Verify & SDV Documents	Buyer/Section Support	DT	8/25/17
E-Mail/Fax NOA to Contractor/Assignee & Agency Contact	Buyer/Section Support	DT	8/25/17
Copy/Save As Statewide Notice to Internet Folder	Buyer/Section Support	DT	8/25/17

10. Log Participation Commitment Information

11. Image Contract Amendment Packet	Central Support-Participation		
	Central Support-Imaging	DT	9/13